

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

Handwritten: 43, 10/28/02, 1-401, 5-7-01, 71531

INDEX OF CLAIMS

☒ Rejected
☐ Allowed
☐ Canceled
☐ Restricted

 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
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 (Rev. 6/99)

If more than 150 claims or 10 actions
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